

**CITY OF LINCOLN COMMUNITY DEVELOPMENT DEPARTMENT  
COMPLAINT REPORT**

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VIOLATION LOCATION: \_\_\_\_\_

A.P.N.: \_\_\_\_\_

NATURE OF VIOLATION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

OWNER/TENANT'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

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COMPLAINANT'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

COMPLAINANT'S ADDRESS: \_\_\_\_\_

CALL RECEIVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

REFERRED TO: \_\_\_\_\_

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INVESTIGATED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

ACTION TAKEN: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

FOLLOW-UP ACTION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE OF FOLLOW-UP: \_\_\_\_\_ DATE OF COMPLIANCE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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